

In cooperation with the Spokane County Sheriff's Office

REMEDY

Resource Group

Basic Fire Investigation - 40 Hour Course -

Training Opportunity For Fire Investigators and Detectives

This 40 hour course is presented as an introduction to fire/arson investigation for detectives and fire investigators that intend on conducting origin and cause investigations as part of their normal duties. Emphasis is placed upon: fire behavior, sources of ignition, investigative techniques for structures, wildland, and automobiles, fire origin and cause determination, arson motivation, and Washington State and Federal laws. Multiple subject matter experts will be instructing this course. A practical burn cell investigation will also be included. This course has been designed in accordance with NFPA 1033 and 921.

> Course Cost: \$400. Course Length: 40 hours (night / weekend schedule) Minimum class size is 15 students Students must register and/or cancel by March 11, 2011

Primary Instructor: Clifton Mehaffey, CFI

Providing Excellence in Training and Education



7011 E. Trent Avenue, Suite 104 Spokane Valley, WA 99212

Phone: 509-998-8121 E-mail: cliftonm@ remedyresourcegroup.com

www.remedyresourcegroup.com

Course Goals:

- Provide a basic education and training in the principal aspects of fire investigation;
- Develop an understanding of the scientific principles of fire dynamics;
- Ensure a systematic approach to proper scene investigation and documentation;
- Prepare the student to conduct origin and cause investigations;
- Facilitate a thorough follow-up investigation and case presentation.

To Register- mail completed application and money order or check to:

Remedy Resource Group 7011 E. Trent Avenue, Suite 104 Spokane Valley, WA 99212

Call 509-998-8121 or e-mail cliftonm@remedyresourcegroup.com for additional information

Dates:

March 29-31, 2011 / 1800-2200 April 2, 2011 / 0800-1700 (Saturday) April 12- 14, 2011 / 1800-2200 April 16, 2011 / 0800-1700 (Saturday)

Location:

Spokane County Sheriff's Training Center 10319 E. Appleway Avenue Spokane Valley, WA 99206



GENERAL COURSE APPLICATION

PLEASE TYPE OR PRINT CLE	ARLY								
1. GENERAL INFORMATION	7								
Applicant's Name:	icant's Name:			(First)				(Middle)	
Title/Rank:	Applicant's Personnel Number:			Male Female					
Primary Duty Assignment:		Agency:							
Agency Phone:				Applicant's Agency E-Mail Address:					
Agency Mailing Address:	(City, State)							(Zip)	
IF THIS APPLICANT REQUIRES SPECI	AL CLASSROOM	ACCOMODATION, F	PLEASE	E MAKE REQUES	TONA	SEPARATE S	HEET AND	ATTACH TO THIS APPLICATION.	
2. COURSE INFORMATION									
Course Title:				Location of Course:					
Course Dates:	-г								
3. MEALS AND LODGING									
4. In determining eligibility of applicant or his/her agency may 5. APPLICANT PRIORITY	this applica have regard	nt, Remedy Reling the request	esour ted co	ce Group wi ourse or train	II consing. Co	sider any somments:	special n		
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6. TRAINING COORDINATOR EMAIL ADDRESS	@							s sent via email, please s section is complete.	
7. AUTHORIZATION									
Agency Representative Authorize Attendance: Name Signature (Digital Signature OK)	Ī	Title Date				Rem	nedy Tra	ining Use Only	
Return completed application fo Applications may also be sent a must be mailed to the above ad-	s an email at	tachment to clif	ftonm	@remedyres	ource	group.com	, howeve	er, a money order or check	